

<h2 style="margin: 0;">Index of Claims</h2>	Application No. <div style="font-size: 1.5em; font-family: cursive;">10657776</div>	Applicant(s) <div style="height: 20px; border: 1px solid black;"></div>
	Examiner <div style="height: 20px; border: 1px solid black;"></div>	Art Unit <div style="height: 20px; border: 1px solid black;"></div>

<input checked="" type="checkbox"/>	Rejected	<input type="checkbox"/>	(Through numeral) Cancelled	<input type="checkbox"/> N	Non-Elected	<input type="checkbox"/> A	Appeal
<input type="checkbox"/>	Allowed	<input type="checkbox"/> +	Restricted	<input type="checkbox"/> I	Interference	<input type="checkbox"/> O	Objected

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